



Illinois Department of Revenue

2007 IL-990-T-XFor tax years ending **ON** or **AFTER** December 31, 2007**Amended Exempt Organization Income
and Replacement Tax Return**

Do not write in this box.

Indicate what tax year you are amending: Tax year beginning ____/____/____, ending ____/____/____If you are filing an amended return for tax years ending **before December 31, 2007**,
you can not use this form. For prior years, use the amended return form for that year.Write the amount you
are paying.

\$ _____

Step 1: Identify your exempt organization**A** Write your exempt organization name and mailing address.If you have a change, check this box. ☐

Name _____

C/O _____

Mailing address _____

City _____

State _____

Zip _____

B Check this box if Schedule 1299-D is attached. ☐**C** Write your federal employer identification number (FEIN).

____ - ____ - ____ - ____ - ____ - ____

D Write your Illinois Business Tax number (IBT).

____ - ____ - ____ - ____ - ____ - ____

E Check the applicable box for the type of change being made.☐ State change☐ Federal change:If a federal change, check one: ☐ Partial agreed ☐ Finalized**If finalized, write the finalization date:** ____/____/____

Month Day Year

F Check this box if your filing a "corrected" return. ☐**G** Check this box if you are taxed as a corporation. ☐**H** Check this box if you are taxed as a trust. ☐**Step 2: Explain the changes on this return**

Attach remittance payable to "Illinois Department of Revenue" here.

Step 3: Figure your base income or loss**1** Unrelated business taxable income or loss
from U.S. Form 990-T, Line 34.**2** Illinois income and replacement tax deducted in arriving at Line 1.**3** Base income or loss. Add Lines 1 and 2.**A**
As most recently
reported or adjusted**1** _____
2 _____
3 _____**B**
Corrected amount**1** _____
2 _____
3 _____**If the amount on Line 3 is derived only from inside Illinois or if you are an Illinois resident trust,
skip Step 4 and go to Step 5; otherwise complete Step 4.****Step 4: Figure your income allocable to Illinois****4** Trust, estate, or non-unitary partnership business income or loss
included in Line 3.**5** Business income or loss. Subtract Line 4 from Line 3.**6** Total sales everywhere. This amount cannot be negative.**7** Total sales inside Illinois. This amount cannot be negative.**8** Apportionment Factor. Divide Line 7 by Line 6.**9** Business income or loss apportionable to Illinois.
Multiply Line 5 by Line 8.**10** Trust, estate, or non-unitary partnership business income or loss
apportionable to Illinois.**11** Base income or net loss allocable to Illinois.
Add Lines 9 and 10.**4** _____
5 _____
6 _____
7 _____
8 . _____
9 _____
10 _____
11 _____**4** _____
5 _____
6 _____
7 _____
8 . _____
9 _____
10 _____
11 _____

	A	B
	As most recently reported or adjusted	Corrected amount
Step 5: Figure your net replacement tax		
12 Base income or net loss from Line 3 or Line 11.	12 _____	12 _____
13 Replacement tax. Corporations multiply Line 12 by 2.5% (.025); trusts 1.5% (.015).	13 _____	13 _____
14 Recapture of investment credits (Schedule 4255).	14 _____	14 _____
15 Replacement tax before investment credits. Add Lines 13 and 14.	15 _____	15 _____
16 Investment credits (Form IL-477).	16 _____	16 _____
17 Net replacement tax. Subtract Line 16 from Line 15. If negative, write "0."	17 _____	17 _____

Step 6: Figure your net income tax		
18 Base income or net loss from Line 12.	18 _____	18 _____
19 Income tax. Corporations multiply Line 18 by 4.8% (.048); trusts multiply Line 18 by 3% (.03).	19 _____	19 _____
20 Recapture of investment credits (Schedule 4255).	20 _____	20 _____
21 Income tax before credits. Add Lines 19 and 20.	21 _____	21 _____
22 Income tax credits (Schedule 1299-D).	22 _____	22 _____
23 Net income tax. Subtract Line 22 from Line 21. If negative, write "0."	23 _____	23 _____

Step 7: Figure your refund or balance due		
24 Net replacement tax from Line 17.	24 _____	24 _____
25 Net income tax from Line 23.	25 _____	25 _____
26 Total net income and replacement taxes. Add Lines 24 and 25.	26 _____	26 _____
27 Payments		
a Credit from prior year overpayment	a _____	
b Total estimated payments	b _____	
c Form IL-505-B (extension) payment	c _____	
28 Total payments. Add Lines 27a through 27c.		28 _____
29 Tax paid with original return (do not include penalties and interest).		29 _____
30 Subsequent tax payments made since the original return.		30 _____
31 Total tax paid. Add Lines 28, 29, and 30.		31 _____
32 Total amount previously refunded and/or credited for the year being amended.		32 _____
33 Net tax paid. Subtract Line 32 from Line 31.		33 _____
34 Refund. Subtract Line 26 from Line 33.		34 _____
35 Tax due. Subtract Line 33 from Line 26.		35 _____
36 Penalty (See instructions.)		36 _____
37 Interest (See instructions.)		37 _____
38 Total balance due. Add Lines 35 through 37.		38 _____

 **Make your check payable to "Illinois Department of Revenue."**
Write the amount of your payment on the top of Page 1 in the space provided.

Step 8: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Signature of authorized officer	_____/_____/_____ Date	Title	_____ Phone
Signature of preparer	_____/_____/_____ Date	Preparer's Social Security Number or firm's FEIN	_____
Preparer firm's name (or yours, if self-employed)	Address	_____	_____ Phone

Mail this return to: Illinois Department of Revenue, P.O. Box 19016, Springfield, IL 62794-9016